

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JL		08/10/01
O.I.P.E. CLASSIFIER		49	8/20/01
FORMALITY REVIEW	TB	JC 1108	09.17.01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/2/01
2	+	✓	12/2/01
3	+	✓	12/2/01
4	+	✓	12/2/01
5	+	✓	12/2/01
6	+	✓	12/2/01
7	+	✓	12/2/01
8	+	✓	12/2/01
9	+	✓	12/2/01
10	+	✓	12/2/01
11	+	✓	12/2/01
12	+	✓	12/2/01
13	+	✓	12/2/01
14	+	✓	12/2/01
15	+	✓	12/2/01
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34	+	✓	12/2/01
35	+	✓	12/2/01
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If more than 150 claims or 10 actions  
 staple additional sheet here

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